



SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH

Interim Director Mark W. Binkley, JD

PEE DEE MENTAL HEALTH CENTER

Patrick M. Bresnan, MBA, Executive Director

October 2019

DMH
MISSION:
TO SUPPORT THE
RECOVERY
OF PEOPLE WITH
MENTAL
ILLNESSES.



Babcock Building Cupola

DMH HISTORY AND DEMOGRAPHICS

South Carolina has a long history of caring for those suffering from mental illness. In 1694, the Lords Proprietors of South Carolina established that the destitute mentally ill should be cared for by local governments. The concept of "Outdoor Relief," based upon Elizabethan Poor Laws, affirmed that the poor, sick and/or disabled should be taken in or boarded at public expense. In 1762, the Fellowship Society of Charleston established an infirmary for the mentally ill. It was not until the 1800's that the mental health movement received legislative attention at the state level.

Championing the mentally ill, South Carolina Legislators Colonel Samuel Farrow and Major William Crafts worked zealously to sensitize their fellow lawmakers to the needs of the mentally ill, and on December 20, 1821, the State Legislature passed a statute-at-large approving \$30,000 to build the South Carolina Lunatic Asylum and a school for the 'deaf and dumb'.

The Mills Building, designed by renowned architect Robert Mills, was completed and operational in 1828 as the South Carolina Lunatic Asylum. The facilities grew through the decades to meet demand, until inpatient occupancy peaked in the 1960's at well over 6,000 patients on any given day. Since the 1820's, South Carolina state-run hospitals and nursing homes have treated

approximately one million patients and provided over 150 million bed days.

In the 1920's, treatment of the mentally ill began to include outpatient care as well as institutional care. The first outpatient center in South Carolina was established in Columbia in 1923.

The 1950's saw the use of phenothiazines, "miracle drugs" that controlled many severe symptoms of mental illness, making it possible to "unlock" wards. These drugs enabled many patients to function in society and work towards recovery, reducing the need for prolonged hospitalization. Government support and spending increased in the 1960's. The South Carolina Community Mental Health Services Act (1961) and the Federal Community Health Centers Act (1963) provided more funds for local mental health care.

The South Carolina Department of Mental Health (DMH) was founded in 1964. In 1967, the first mental healthcare complex in the South, the Columbia Area Mental Health Center, was built. Since then, the Centers and clinics have served more than three million patients, and provided more than 42 million clinical contacts.

Today, DMH operates a network of 16 community mental health centers, multiple clinics, three hospitals, three veterans' nursing homes, one community nursing home, a Forensic Program, and a Sexually Violent Predator

Treatment Program (SVPTP). DMH is one of the largest hospital and community-based systems of care in SC.

In response to community needs, DMH has developed multiple innovative programs, two of which are its School Mental Health Services (SMHS) and Telepsychiatry. As of July 2019, DMH's SMHS has mental health professionals embedded in more than 700 public schools and serves thousands of children per year. DMH Telepsychiatry utilizes state-of-the-art equipment that allows doctors to see, speak with, and evaluate patients from remote locations. DMH provides telepsychiatry in its clinics, hospitals, and 23 community hospital emergency departments. DMH Telepsychiatry programs have provided more than 118,000 comprehensive evaluations and services.

DMH HOSPITALS AND NURSING HOMES

Columbia, SC

G. Werber Bryan Hospital

Morris Village Alcohol & Drug Addiction Treatment Center

C.M. Tucker, Jr. Nursing Care Center - Stone Pavilion
(Veterans Nursing Home)

C.M. Tucker, Jr., Nursing Care Center - Roddey Pavilion

Anderson, SC

Patrick B. Harris Hospital

Richard M. Campbell Veterans Nursing Home

Walterboro, SC

Veterans Victory House
(Veterans Nursing Home)

DMH
OPERATES A
NETWORK OF
SIXTEEN
COMMUNITY
MENTAL HEALTH
CENTERS,
MULTIPLE
CLINICS,
THREE HOSPITALS,
THREE VETERANS'
NURSING HOMES,
AND ONE
COMMUNITY
NURSING HOME.



Pee Dee Mental Health Center

125 East Cheves Street

Florence, SC 29506

(843) 317-4089

Counties Served: Florence, Darlington, Marion

<https://www.peedementalhealth.org>

PATRICK M. BRESNAN, MBA, EXECUTIVE DIRECTOR



Executive Director
Patrick M. Bresnan, MBA

While working in his first professional job at a therapeutic treatment facility for teenage boys in 1995, Pat Bresnan knew the direction in which he wanted his career to prosper in the field of Community Health. “While working in a Special Needs Unit as a clinical manager, I was interacting with teenage boys who were moderately to severely behaviorally disturbed, and most often emotionally disturbed as well, and it provided me an understanding of mental illnesses very early on in my career.”

Originally from Western Pennsylvania, Bresnan moved to South Carolina in 1999 working in the field of health education/health promotion, while he obtained his MBA from Francis Marion University.

Bresnan, a DMH employee for 11 years, was hired as the business administrator at Pee Dee Mental Health Center (PDMHC) prior to becoming executive director in 2015. According to Bresnan, the Center provides a vast array of specialized services and is always interested in collaborating with other organizations to deliver effective services. Some of the projects include Telepsychiatry in schools, Pee Dee Resiliency, Supporting Providers and Reaching Kids (SPARK), Reaching Families, and Engaging Patients in Care (EPIC).

“Many of the services that we offer are the same as those of the other DMH community

mental health centers around the state, but we have partnered with several nationally recognized researchers from UofSC, UCLA, and MUSC to implement a number of innovative projects, all of which are, or are in the process of becoming, evidenced-based practices. These projects help our mental health staff improve quality of care for our patients.” In addition to traditional outpatient services, the Center offers several intensive services outside of its clinics that are provided in the community, patients’ homes, and in schools.

When asked about the strengths of the Center, Bresnan said, “All of our employees are committed to treating our patients with not only the most appropriate treatment, but also with the utmost respect.

“Another strength is the incredible access to our services,” he continued. “In the past four and a half years, we have offered timely appointments for all new referrals. Whether it’s an Emergency, Urgent, or Non-Urgent referral, our goal is to offer same day or next day appointments.”

Bresnan also stressed, “The Department’s mission is to support the recovery of people with mental illnesses, and that is what we do, in each of our four locations, each and every day.”

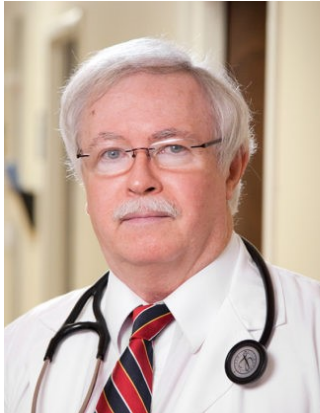
“WHETHER IT’S
AN EMERGENCY,
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..... BRESNAN

- ◆ PDMHC Received it’s 8th Consecutive Three-Year Commission on Accreditation of Rehabilitation Facilities (CARF) accreditation through November 20, 2021.
- ◆ In 2019, PDMHC staff provided 88,441 services.



GREGORY V. BROWNING, M.D., BOARD CHAIR



Dr. Gregory V. Browning

TO ASSIST WITH
PATIENT NEEDS,
THE BOARD
ESTABLISHED THE
PDMHC BOARD
FOUNDATION.

A former band director, Greg Browning, M.D., played the trumpet professionally and has served as a member of the Charleston and Florence Symphony orchestras.

After graduation from Summerville High School, Browning earned Biology and Chemistry degrees at Charleston Southern University, and graduated from the Medical University of South Carolina, with a doctorate in Pharmacy.

After working two years in that field, he made the decision to become a medical doctor and earned a medical degree from MUSC, certified in family medicine and clinical hypertension. He worked as a family/general practitioner

for more than 33 years at his private practice in Florence before joining the medical staff at HopeHealth.

Presently, the HopeHealth Pain Management Office operates under his guidance. Dr. Browning is a certified Medically Assisted Treatment Physician, which deals with addictions, including opioids, codeine, heroin, and alcohol.

Dr. Browning has a “heart” for the mentally ill, which was the driving force behind his decision to become a member of the Pee Dee Mental Health Center Board of Directors, appointed by then-Governor Mark Sanford in May of 2010.

As Board Chair, he is an experienced leader who is not afraid to tackle tough issues. Under the leadership of Dr. Browning, and to assist in providing for the needs of the patients of PDMHC, the Board members established the PDMH Board Foundation.

Dr. Browning and members of the PDMHC Board believe the Center’s greatest assets are its dedicated staff and the excellent leadership of Patrick Bresnan.

Together, with informed, caring Board members and compassionate individuals in the community, we can make life better for the mentally ill of Darlington, Florence, and Marion counties.

JAMES P. MAZGAJ, M.D., MEDICAL DIRECTOR



Dr. James P. Mazgaj

TELEPSYCHIATRY
TRANSFORMS
PDMHC
INTO A NEW ERA
OF SERVICE
DELIVERY.

James P. Mazgaj, M.D., began his career with PDMHC in June of 1998.

Originally from West Seneca, New York (a suburb of Buffalo), he obtained a Bachelor of Arts degree in Biology at the University of Rochester. After graduating from medical school at the Autonomous University of Guadalajara, he received his psychiatry residency training at the University of Connecticut. Dr. Mazgaj is Board Certified by the American Board of Psychiatry and Neurology.

After completing his training, Dr. Mazgaj began private practice in York, Pennsylvania, with Delphic Medical

Center. Dr. Mazgaj was employed as assistant medical director at PDMHC from 2006 to 2012. He accepted a position as psychiatrist at the Florence VA in 2012, where he was employed until deciding to return to PDMHC in 2014. Dr. Mazgaj was subsequently named medical director of the Center in April of 2015.

Work-oriented, Dr. Mazgaj sets a high standard for achievement. He supervises medical staff and believes in being productive. He always exceeds the productivity standards at PDMHC.

Dr. Mazgaj is an examiner at Florence County Probate

Court on Thursday mornings.

With the implementation of Telepsychiatry, Dr. Mazgaj realized the fulfillment of a goal to add additional psychiatric coverage for Center patients via this technology.

The Center has also hired additional medical staff to provide patients more accessibility to services with less wait time. Dr. Mazgaj remains hopeful the Center will one day have a full-time child psychiatrist.

Dr. Mazgaj is pleased to serve as PDMHC’s medical director, especially as its psychiatric services transform into a new era of service delivery.

GAYE M. DOUGLAS, DNP, MEd, APRN-BC

Gaye M. Douglas, DNP, MEd, APRN-BC, joined the PDMHC team in June of 2018 to provide mental health services to children and adolescents.

She was brought on board specifically to implement the Center's School Mental Health Services Telepsychiatry Program, whereby services are rendered from the mental health professional's office directly to the student in the school counselor's office through electronic means. Prescriptions, when necessary, are electronically transmitted to the pharmacy of the parent's choice. This pilot program, supported through a grant from The Duke Endowment, covers schools in the Darlington County area.

"Reducing barriers to healthcare is something I have always been passionate about. Coming from a rural county with limited healthcare resources, I have witnessed firsthand how difficult it is for families to get the services they need."

The School Mental Health Services Telepsychiatry Program benefits families by allowing a parent to attend the mental health consultation in person or by phone if transportation is an issue or they find it difficult to leave work. "It is not unusual to find parents working jobs that do not provide sick time; parents lose income when they have to take time off work to see to their children's needs."

Douglas, a native of Hemingway, SC, began her healthcare education 37 years ago at Florence-Darlington Technical College, obtaining Associate Degrees in both Radiologic Technology and Nursing. Interested in advanced practice nursing, she continued her education and earned a Bachelor's Degree in Nursing from MUSC, a Master's Degree in Education from USC, and a Master's Degree in Family Health Nursing from USC's Family Nurse Practitioner Program. She then returned to MUSC to complete her Doctor of Nursing Practice degree; Dr. Douglas is Board Certified by the American Nurses Credentialing Center.



Gaye M. Douglas, DNP
DNP, MEd, APRN-BC

THE FIRST DMH
TELEPSYCHIATRIC
SCHOOL
CONSULTATION
WAS
PROVIDED BY
GAYE DOUGLAS
ON DECEMBER 17,
2018.

CATHY TIMMONS, DIRECTOR OF COMMUNITY INTEGRATION PROGRAMS

Cathy Timmons, MSW, is director of Community Integration Programs (CIP) at PDMHC. She is well known in the community as a strong advocate for the needs of the mentally ill.

Programs under her direction include:

Housing Program serves adult patients with a history of treatment and compliance, few hospitalizations, and infrequent ER visits to live independently at home.

Intensive Community Treatment Program (ICT) provides intensive services to persons with serious and

persistent mental illness. Services are individually designed through a Person-Centered Planning process to support patients.

Homeshare Program transitions psychiatrically disabled adults from the hospital to the community.

Toward Local Care Program (TLC) focuses on adults with multiple and/or long-term hospitalizations by providing community-based and intensive individualized residential services.

Individual Placement and Support Program (IPS) is the model of occupational therapy that assists patients to

overcome mental disabilities and obtain employment.

Peer Support Services (PSS) provides therapeutic services conducted by trained paraprofessionals who are receiving or have received mental health services.

Silver Years Day Treatment Program offers therapeutic activities in a group setting for patients 50 years of age or older with chronic mental illness or symptoms of Dementia.

Community Housing Program (CSP) provides mentally ill patients needed assistance to obtain housing and live independently.



Cathy Timmons, MSW

"SUPPORTING
INDEPENDENT
LIVING IMPROVES
QUALITY OF LIFE."
.....TIMMONS

NADINE LIVINGSTON, DIRECTOR OF OUTPATIENT CLINICS



Nadine Livingston, MA

Originally from Georgetown, SC, Nadine Livingston began her career in service delivery in New Haven, CT, working with the YALE Child Study Center and later the City of New Haven.

After relocating back to South Carolina, she started what would be a 17-year career with the South Carolina Department of Social Services.

Prior to moving to the DSS central office in Columbia, she served as DSS county director for Williamsburg, Florence, and Marion counties.

THE GREATEST
RESOURCE FOR A
SUCCESSFUL
PROGRAM IS
STAFF.

.....LIVINGSTON

In May 2019, Livingston ended her 13-year tenure as a member of the PDMHC Board of Directors to accept the position of director of Outpatient Clinics at PDMHC. In her current role, she has responsibility for operations at PDMHC clinics located in Florence,

Hartsville, Marion, and Lake City. Recognizing that staff are the greatest resource for a successful program, she believes in encouraging and motivating staff members to reach their full potential.

PDMHC Executive Director Patrick Bresnan has expressed great confidence in Livingston's abilities as an experienced and effective leader who is outcome oriented. As a former Board member, she is an advocate for the mentally ill. She cares about the quality of services provided by staff.



Susan Carter, MS, LPC

SUSAN CARTER, OFFICE OF PERFORMANCE IMPROVEMENT AND EDUCATION DIRECTOR

Since 2013, Susan Carter has directed the PDMHC Office of Performance Improvement and Education (OPIE), which provides training to staff and members of the community.

Carter directs the Center's involvement with several grant-funded projects by writing proposals and reports, participating in team meetings, and serving as local coordinator for projects shared with agencies and institutions.

OPIE ensures new employees receive all required classroom training within the first 30 days of employment: BEST, Defensive Driving, and First Aid/CPR are provided to new staff.

Clinical training is provided quarterly by OPIE, which includes a two-day Clinical Collaborative Documentation training.

Each October, OPIE staff work collaboratively with Lighthouse of Conway to plan and implement a training for clinicians, providing access to free training from experts, as well as no-cost continuing education credits. Attendance has increased each year; last year, approximately 175 counselors and mental health professionals from across the State attended the *Florence Mental Health Symposium*.

OPIE provides approved counselors with LPC and LPC/S supervision hours.

OPIE also provides training to LPC supervisors statewide.

OPIE assists with several grant-funded research projects, including the Pee Dee Resiliency Program and the Reaching Families project. OPIE is working closely with the Zero Suicide Initiative to provide training to all staff on the importance of suicide prevention and early intervention for at-risk individuals.

OPIE provides a way for PDMHC to improve in a variety of areas, including access to evidenced-based trainings and clinical resources.

OPIE
PROVIDES
UNIQUE
TRAINING
OPPORTUNITIES.

ELLEN C. HAMILTON, EXECUTIVE DIRECTOR PEE DEE COALITION AGAINST DOMESTIC & SEXUAL ASSAULT

“Since the spring of 1986, the formation and progress of Pee Dee Coalition Against Domestic and Sexual Assault can be attributed to the partnerships, tangible support, and guidance from key community agencies which interface with survivors of some of South Carolina’s most intractable social problems. Pee Dee Mental Health Center has been and continues to be one of the Coalition’s most important partners in the region,” said Ellen C. Hamilton, executive director of the Pee Dee Coalition Against Domestic & Sexual Assault.

The Coalition is a nonprofit, volunteer-supported organization dedicated to the reduction of sexual assault, family violence, and child abuse, and to meeting the needs of victims and their families with a presence in seven Pee Dee counties.

As one of the state’s 16 sexual assault centers, 15 domestic violence organizations, and operating one of the 15 certified Children’s Advocacy Centers (Durant Children’s Center), the Coalition has been committed to joining with its partner agencies in bringing crisis intervention and support services to the entirety of the Pee Dee.

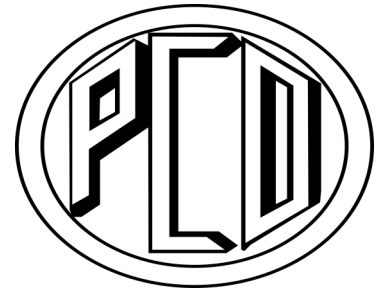
Emergency and transitional shelters are provided in two locations in the Pee Dee, with PDMHC staff currently serving in an advisory capacity on the emergency shelter’s advisory council.

Child abuse assessment and treatment services are provided in two locations through the Elizabeth Pettigrew Durant Children’s Center and the partnership with PDMHC, enabling an out-stationed therapist to be co-located in one of the sites.

This co-location has been part of the Durant Children’s Center since it’s opening in the mid 1990s.

One of the most important but least visible programs is ‘Alternative to Violence’, a tertiary prevention effort targeting domestic violence offenders adjudicated through the courts. PDMHC staff were instrumental in the establishment of this service in 1995, and now 13 groups in six counties meet weekly for 26 weeks, focusing on the reduction of domestic murders and serious physical injury.

PDMHC has been and continues to be a close services partner to the Coalition and its work. PDMHC shares the Coalition’s vision to make the Pee Dee a safer and more compassionate community.



“PDMHC HAS
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PARTNERS.”

.....HAMILTON

DENNIS SULLEN—DIRECTOR OF CRISIS AND EMERGENCY SERVICES

Under the direction of Dennis Sullen, MS, Crisis Services are available 24 hours a day, seven days per week at PDMHC.

During regular business hours, services are accessed through the Crisis Team at the Florence Center; after hours and on weekends access is available via the Center’s Community Crisis Response Intervention Team (CCRI).

The CCRI Team is available 365 days a year within 60 minutes of contact with the Crisis Team.

The goal is to establish crisis stabilization treatment in the community, with partnership

from the hospitals.

Emphasis is placed on restoring patients to the highest possible functional state in the least restrictive environment.

A crisis counselor is available to see patients from 8:30 am to 5:00 pm, Monday through Friday, in the Florence Clinic and services are provided to ERs in our catchment areas.

CRISIS SERVICES
ARE AVAILABLE
24/7.



Dennis Sullen, MS



TO SUPPORT THE RECOVERY OF
PEOPLE WITH MENTAL ILLNESSES.

SC DEPARTMENT OF MENTAL HEALTH

2414 Bull Street
Columbia, South Carolina 29201

Phone: (803) 898 - 8581

WWW.SCDMH.NET

Pee Dee Mental Health Center

125 East Cheves Street
Florence, SC 29506
(843) 317-4089

Darlington County Clinic

900 South Fourth Street
Hartsville, SC 29550
(843) 332-4141

Lake City Clinic

675 N. Matthews Road
Lake City, SC 29560
(843) 394-7600

Marion Clinic

1100 S. Main St.
Marion, SC 29571
(843) 431-1100

RECOVERY SPOTLIGHT - Doretha Hickson

From an early age, I felt different from other people. I was very quiet at home and in school. When my teachers asked why I couldn't talk, I couldn't explain. I just felt like an outcast.

This feeling got worse when I was seven years old and my mother became sick. I was only ten when she passed away. My world went black and everything was dark from then on. After she died, my father didn't spend much time with me. Things got better for a while when he remarried.

When I got pregnant at 17, my father rejected me again and I felt alone and trapped at home. I started working at a

paper company to support myself and my daughter. I found out that I loved to work and was good at it, until I developed serious health problems and my doctor said that I would not be able to work again. COPD had damaged my lungs and was also stealing my eyesight. During this same period, my father and step-mother passed away within six months of each other, triggering a depression worse than any I had experienced before. My world fell apart and I had to quit work after 17 years.

I was later referred to PDMHC and met Dr. Phil Bowman. I was tired of life, and had given up on feeling

better, but Dr. Bowman believed in me and in my recovery. I met my first and only counselor, JoAnn Reaves at PDMHC. The encouragement of the caring mental health professionals at PDMHC gave me motivation to work again.

Dr. James P. Mazgaj and Vickie Redden, Job Coach, were always on my side and still continue to push me and inspire me to move forward.

I have been a Peer Support Specialist at PDMHC for over 15 years. I still love my job and I am thankful to make my way to work each day to show others that "no matter what, you have to keep it moving". It's good to smile again!



Doretha Hickson,
Peer Support Specialist

FOR MORE THAN 15
YEARS, PEER
SUPPORT
SPECIALIST
'KEEPS IT MOVING'
AT PDMHC.